DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled ____ APPARATUS AND METHOD FOR TISSUE REMOVAL ____ the specification of which (check one) Li is attached hereto. X was filed on June 28, 1990 Application Serial No. _ _____ (if applicable)... and was amended on _ I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a). I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: Priority Claimed Prior Foreign Application(s) (Day/Month/Year Filed) Number) (Country) (Day/Month/Year Filed) (Country) (Number) I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application: (Status-patented, pending, abandoned) (Filing Date) (Application Serial No.) (Status—patented, pending, abandoned) (Filing Date) (Application Serial No.) POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys: Thomas L. Tarolli, Reg. No. 20,177; Robert B. Sundheim, Reg. No. 20,127; Calvin G. Covell, Reg. No. 24,042; Barry L. Tummino, Reg. No. 29,709; Paul E. Szabo, Reg. No. 30,429; Greg Strugalski, Reg. No. 32,311; each with full powers of substitution and revocation, and; to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith. SEND CORRESPONDENCE TO: TAROLLI, SUNDHEIM & COVELL, 1111 LEADER BLDG., CLEVELAND, OH 44114. DIRECT TELEPHONE CALLS TO: Paul E. Szabo, Esq. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Full name of sole or first inyentor. Inventor's signature I KIN M. Laull Citizenship U.S.A. Residence <u>Watson</u>, Illinois Lamkin Place Post Office Address Watson. Illinois 62473 Full name of second joint inventor, if any Date _ Inventor's signature _____ _____Citizenship __ Residence Post Office Address

		/ · · · · · · · · · · · · · · · · · · ·		- Attorney's RON-1360
plicant or Pat	enter: Peter M.	wnutti		Attorney's BON-1360-
rial or Patent.	No.:			
led or Issued:	June 28, 1990	D FOR TISSUE REM	OVAL	
:: APPAR	ATUS_AND METHO	D. FURLINGER		
	•	•		
• - •	•	• • •		
		MENT (DECLARATION) CI	LAIMING SMALL	ENTITY
	VERIFIED STATES	MENT (DECLARATION) CI 1.9 (f) and 1.27 (b)) — INC	DEPENDENT INVI	ENTOR
• •	STATUS (37 CFR	1.9 (1) 2113 1.2. (5)		
oses of paying Office with reg	ed inventor, I hereby decla reduced fees under section and to the invention entit	are that I qualify as an indepe on 41 (2) and (b) of Title 35, tled <u>APPARATUS</u> AND	ndent inventor as d United States Cod METHOD POI	efined in 37 CFR 1.9 (c) for pur- e, to the Patent and Trademark R TISSUE REMOVAL
described in				•
	عالىنىدۇ و رسى دارسى		*** ** =	20 7000
[] the sp	pecification filed herewith	·	filed June	28, 1990
<pre>{X} applic</pre>	ation serial no.	, i	ssued	•
				act or law to assign, grant, convey dependent inventor under 37 CFR
Eich person, ounder contract [X] no s [] pers	concern or organization to it or law to assign, grant, such person, concern, or c ons, concerns or organiza	organization		concern or organiza-
FULL NAMI				NONPROFIT ORGANIZATION
in ·	[] INDIVIDUAL	[] SMALL BUSINES	3 (0.5625.5	
FULL NAM	E			
対DDRESS .		1 ISMALL BUSINE	SS CONCERN .	[] NONPROFIT ORGANIZATION
	[] INDIVIDUAL	1 13MALE BESINE		
FULL NAM	1E			
ADDRESS .		1 3 SMALL BUSINE	SS CONCERN	I NONPROFIT ORGANIZATION
	[] INDIVIDUAL	1 12VINET BOSING	J3 C01.1C2	•
ment to small due after the I hereby decard belief a and belief a and the like	all entity status prior to p ne date on which status as clare that all statements m	ade herein of my own knowle further that these statements by fine or imprisonment, or tements may jeopardize the	appropriate. (37 C) dge are true and the were made with the	e in status resulting in loss of entitle the issue fee or any maintenance fe FR 1.28 (b)) at all statements made on informatio knowledge that willful false statements 1001 of Title 18 of the United State cation, any patent issuing thereon, 6
any patent	to mindir sing territor are	•		
			. •	•
		· •		
•		•		
Petei	r M. Bonutti	NAME OF INVENTO	IR .	NAME OF INVENTOR
Petei	r M. Bonutti FINYENTOR	NAME OF INVENTO	R	NAME OF INVENTOR
Petei		NAME OF INVENTO)R	NAME OF INVENTOR
Petei		NAME OF INVENTO)R	NAME OF INVENTOR
Petei		NAME OF INVENTO)R	·. · ·
Petei				NAME OF INVENTOR Signature of Inventor
Petei NAME OF		NAME OF INVENTO		·. · ·
Petei NAME OF	DM. Bull			·. · ·

Date

Date